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                      UNITED STATES DISTRICT COURT
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                 FOR THE NORTHERN DISTRICT OF CALIFORNIA
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   PAMELA THOMPSON, Individually )
                                        CASE NO.: C 07-05437 PJH
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   and as Personal
   Representative of CHARLES
                                          [Sonoma County Superior
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   THOMPSON, Deceased,
                                          Court Case No. 241544]
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                                          NOTICE OF MOTION AND MOTION
              Plaintiff,
                                          TO DISMISS PURSUANT TO FRCP
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                                          12(b)(6); MEMORANDUM OF
         VS.
                                          POINTS AND AUTHORITIES
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   CONSECO SENIOR HEALTH
   INSURANCE COMPANY, a
                                         DATE: March 19, 2008
                                          TIME: 9:00 a.m.
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   Pennsylvania corporation,
                                          CTRM: 3,17<sup>th</sup> Floor
   DOES 1 through XX
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                                          Assigned to: The Honorable
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              Defendant(s).
                                          Phyllis J. Hamilton
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   TO: THE UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF
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   CALIFORNIA AND TO THE INTERESTED PARTIES AND THEIR ATTORNEYS OF
2.2.
   RECORD:
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         Please take notice that on March 19, 2008, at 9:00 a.m. in
   Courtroom 3, 17th Floor, of the above entitled court located
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   at the U.S. Courthouse, 450 Golden Gate Avenue, San Francisco,
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   California, defendant Conseco Senior Health Insurance Company
    ("defendant") will move the court for an order dismissing Pamela
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   Thompson, insofar as she is suing individually, i.e. in her own
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right, on the third claim for violation of Welfare and Institutions Code §\$15600.

Said motion will be made pursuant to FRCP 12(b)(6), on the ground that said claim does not state a claim on which relief can be granted.

Said motion will be based on this notice, the pleadings, records and documents on file in this action, the memorandum of points and authorities served and filed herewith, as well as such oral and documentary evidence as may be presented at the time of the hearing of the motion.

DATED: 2/11/08

LAW OFFICES OF MARC J. WODIN

/S/ Marc J. Wodin
MARC J. WODIN

Attorneys for Defendants CONSECO SENIOR HEALTH INSURANCE COMPANY,

MEMORANDUM OF POINTS AND AUTHORITIES

1. Pamela Thompson has no claim, in her own right, for financial elder abuse. 1

(1) Introduction: History related to the prior motion to dismiss and nature of plaintiff's allegations of elder abuse in the first amended complaint.

Plaintiff Pamela Thompson previously filed a complaint, in which she sought to proceed on claims for breach of contract, bad faith, and elder abuse, both as representative of Charles Thompson, and in her own right. See complaint

The complaint alleged that Charles Thompson was insured under an insurance contract issued to him by defendant, which was attached as an exhibit to the complaint, and that defendant acted wrongfully in withholding benefits due thereunder. See complaint.

Defendant brought a motion to dismiss the complaint of Pamela Thompson, insofar as she was seeking to proceed as a plaintiff in her own right, on the ground that she had no standing to sue in such capacity on those claims. Under California law, a non-party to an insurance contract has no standing to enforce it, or recover extra-contractual damages, for

¹ This motion is only directed at Pamela Thompson's attempt to proceed on a claim for elder abuse, as a plaintiff, "individually," i.e. in her own right, and is not directed at her attempt to proceed on a claim for elder abuse, in her capacity as representative of Charles Thompson, deceased, to recover for elder abuse which defendant allegedly committed against him.

the wrongful withholding of benefits. The insurance contract was

issued to Charles Thompson, who was the owner and insured, and the only one entitled to contractual benefits. Pamela Thompson was not a party to the contract, and was not entitled to contractual benefits. See motion to dismiss.

The court granted the motion as to the claims for breach of contract and bad faith, and dismissed Pamela Thompson as a plaintiff on those claims. See Order re Motion to Dismiss.

The court denied the motion as to the claim for elder abuse, because it was pled so tersely and vaguely, that it was not clear whether it was, like the other claims, based on the withholding of benefits under the insurance contract, or had some other factual basis ("the claim appears not to be one on the insurance contract, though this is far from clear from the pleading of the claim"). However, because of this lack of clarity as to the factual basis for the claim, the court dismissed the claim as being "not sufficient under Federal Rule of Civil Procedure 8(a) to put [defendant] on notice as to what type of elder abuse claim is being asserted, and what facts support the claim." The Court granted leave to amend this claim. See Order re Motion to Dismiss.

Plaintiff has now filed a first amended complaint ("FAC"), in which Pamela Thompson again claims to be a plaintiff, in her own right, on the claim for elder abuse. Further, she now specifically alleges that the factual basis for this claim is, indeed, the same as for the other claims - the withholding of benefits allegedly due under the insurance contract.

In that regard, she first, in paragraph 15 of the FAC, incorporates allegations from the prior claims, in which it is

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alleged that: Charles Thompson purchased and was insured under a long term care insurance contract issued by defendant to Charles Thompson, and which is attached as an Exhibit to the FAC. (FAC, paras 5-6 and Exhibit A to FAC)² In or about April 2005, Charles Thompson became entitled to benefits under the policy. (FAC, paras. 6-7) Defendant wrongfully withheld benefits due thereunder (FAC, paras. 7, 9) Charles Thompson died on June 8, 2007, and Pamela Thompson is his representative/successor. (FAC, caption, title of claim and para. 10)

She then alleges, in paragraph 16 of the FAC, that defendant committed elder abuse by withholding benefits on his claim, after it had accepted the premiums which he paid to purchase the policy. ("It was obvious to any reasonable person that benefits were payable under the policy. as described above. Thus, Defendant's failure to pay under the policy constituted financial abuse. . .")

(2) Because it is now clear that the claim for elder abuse is based on the withholding of benefits under the insurance contract, Pamela Thompson has no standing to proceed on that claim, in her own right, any more than she had standing to sue, in her own right on the other claims.

As noted in defendant's prior motion to dismiss, it has been

² The insurance contract was attached as an exhibit to the complaint. It is alleged to be attached as an exhibit to the FAC,

Law Offices Marc J. Wodin the exhibit separately. Wodin Dec.

(see para. 5) but was not attached in the filing. Defendant's

attorney brought this to the attention of plaintiff's attorney, who advised that the omission was inadvertent, and who then filed

the law in California, for many years, that a non-party to an insurance contract, has no standing to enforce it or recover extra-contractual damages, for the wrongful withholding of benefits. Seretti v. Superior National Insurance Co. (1999) 71 Cal.App. 4th 920, 930 ("[S]omeone who is not a party to the contract has no standing to enforce it or recover extracontractual damages for the wrongful withholding of benefits" - affirming an order sustaining defendants' demurrer, where a person, who was not a party to the insurance contract, sought to sue the insurer in contract and tort for wrongful denial of benefits); Jones v. Aetna Casualty and Surety Co. (1994) 26 Cal.App. 4th 1717, 1722 (same); Hatchwell v. Blue Shield of California (1988) 198 Cal. App. 3d 1027, 1034 (same) ³

That is logical. A person who is not a party to an insurance contract - who is not the owner or insured, entitled to benefits of the contract - should not reasonably be accorded standing to sue, in her own right, to enforce the policy or recover extracontractual damages, based on the wrongful withholding of benefits under the contract. Such standing should reasonably be accorded only to the contracted party, himself, or, if he is deceased or incapacitated, through a representative.

Pamela Thompson is not a party to the insurance contract, and is not entitled to benefits thereunder. See FAC, paras. 5-7,

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³ Further, "a non-party who is nevertheless entitled to policy benefits, such as an insured person under the terms of the policy, or an express beneficiary, has standing only if he or she is the *claimant* whose benefits are wrongfully withheld." <u>Seretti, supra, p. 930, and Jones, supra, p. 1722, citing <u>Hatchwell</u>, supra</u>

and Exhibit A to FAC. She has no standing to bring a claim, in her own right, for the alleged wrongful withholding of benefits under the insurance contract. Now that it is clear that the claim for elder abuse is, like the previous claims, based on an allegation that defendant wrongfully withheld benefits under that contract, her claim is barred, just like the previous claims.

Further, the fact that the claim for elder abuse is a statutory, rather than a common law claim, does not change this result. A statute is to be construed in light of the common law, unless its language clearly and unequivocally discloses otherwise. Catholic Mutual Relief Society v. Superior Court (2007) 42 Cal. 4th 358, 372 ("[U]nless expressly provided, statutes should not be interpreted to alter the common law, and should not be construed to avoid conflict with common law rules. 'A statute will be construed in light of common law decisions, unless its language clearly and unequivocally discloses and intention to depart from, alter or abrogate the common law rule concerning the particular subject matter.")

Thus, unless the elder abuse statute "clearly and unequivocally" abrogates this rule, and says that a non-party to the insurance contract does have standing, acting in his or her own right, to enforce it, and recover extra-contractual damages, for the wrongful withholding of benefits, she has no standing to proceed on such a basis.

It does not do so, and she cannot proceed on any such basis. The financial elder abuse statute, appears as Welfare and

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Institutions Code §15610.30. 4

Preliminarily, by the express language of the statute, financial elder abuse only applies to abuse of elders or dependent adults. Therefore, if Pamela Thompson is seeking to recover for elder abuse in her own right, she must either qualify as an elder or dependent adult, terms which are specifically defined by statute. ⁵ There is no allegation in the FAC, that she

⁽a) 'Financial abuse' of an elder or dependent adult occurs when a person or entity does any of the following:

⁽¹⁾ Takes, secretes, appropriates, or retains real or personal property of an elder or dependent adult to a wrongful use or with intent to defraud, or both.

⁽²⁾ Assists in taking, secreting, appropriating, or retaining real or personal property of an elder or dependent adult to a wrongful use or with intent to defraud, or both.

(b) A person or entity shall be deemed to have taken, secreted, appropriated, or retained property for a wrongful use if, among other things, the person or entity takes, secretes, appropriates or retains possession of property in bad faith.

⁽¹⁾ A person or entity shall be deemed to have acted in bad faith if the person or entity knew or should have known that the elder or dependent adult had the right to have the property transferred or made readily available to the elder or dependent or to his or her representative.

⁽²⁾ For purposes of this section, a person or entity should have know of a right specified in paragraph (1) if, on the basis of the information received by the person or entity or the person or entity's authorized third party, or both, it is obvious to a reasonable person that th elder or dependent adult has a right specified in paragraph (1).

⁽c) For purposes of this section, 'representative' means a person or entity that is either of the following:

⁽¹⁾ A conservator, trustee, or other representative of the of the estate of an elder or dependent adult.

⁽²⁾ An attorney-in-fact- of an elder or dependent adult who acts within the authority of the power of attorney.

⁵ Indeed, as a preliminary, but essential matter, the complaint does not even allege facts that show that Pamela Thompson qualifies as a elder or dependent adult, entitled to bring a claim for anything under the statute. As noted, in order to bring a claim under the statute, one must be an elder or

is either.

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Second, she could not recover in her own right even if she did so qualify. The statute nowhere purports to abrogate the above noted common law rule that a non-party to an insurance contract has no standing to enforce it or recover extracontractual damages, for the wrongful withholding of benefits, which, as noted, is the factual basis for the claim involved in this case. It nowhere says that a person, who is not a party to an insurance contract, can bring an action, in his her own right, to enforce the contract or recover extracontractual damages, based on the withholding of benefits.

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DATED: February 11, 2008

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/s/ Marc J. Wodin MARC J. WODIN Attorneys for Defendant CONSECO SENIOR HEALTH INSURANCE COMPANY

dependent adult. An "elder" is a "person residing in this state, 65 years or older." Welfare and Institutions Code Section 16510.27 A "dependent adult" is a "person between the ages of 18 and 64 years who resides in this state and who has physical or mental limitations that restrict his or her ability to carry out normal activities or to protect his or her rights, including but not limited to person who have physical or developmental disability, or whose physical or mental abilities have diminished because of age." There is no allegation that she meets either of these requirements.

DECLARATION OF MARC J. WODIN

I, MARC J. WODIN, DECLARE:

1. The facts set forth herein are personally known to declarant, who has firsthand knowledge of the same, and if called as a witness, said declarant could and would competently testify thereto under oath.

2. I am an attorney duly admitted to practice before this court, and I am a principal in the Law Offices of Marc J. Wodin, attorneys of record for defendant Conseco Senior Health Insurance Company in the above entitled action.

/ / /

3. On February 4, 2008, I noticed that the insurance contract, which had been attached as an exhibit to the complaint, and which was referenced as being attached as an exhibit to the first amended complaint was not, in fact, attached as an exhibit. I promptly wrote to plaintiff's attorney, advising him of this fact, and asked him to correct it. I was advised that the correction would be made and that the first amended complaint would be filed as a separate document. On February 11, 2008, I received a call from plaintiff attorney's office advising me that the first amended complaint had been filed. I also received a notification from the court indicating that it had, in fact,

NOTICE OF MOTION AND MOTION TO DISMISS, ETC.